SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEAM SCALISE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KEATON, MARGY, , , Date of Receipt Mailing Address P.O. BOX 551 15 2022 City Zip Code State Transaction ID: SA11A.2439954 TX CONROE 77305-0551 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **RETIRED** RETIRED CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED 2296.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KEINATH, WARREN C., , , Date of Receipt Mailing Address 24 RAVENS POINTE DR. 17 2022 City State Zip Code Transaction ID: SA11A.2439050 LAKE SAINT LOUIS MO 63367-2238 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** CONTRIBUTION **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED Other (specify) ▼ 855.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. KEISER, KEVIN, , , Date of Receipt Mailing Address 2101 E. BEN WHITE BLVD 11 2022 City Zip Code State Transaction ID: SA11A.2434867 TX **AUSTIN** 78741-6921 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AUSTIN COMMUNITY COLLEGE CONTRIBUTION **ASSISTANT 1** Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED 205.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 1 9 1 1 9 1 1 9